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Image# 202203189494022332

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than	An Authorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type 12FE4M5
WOMEN SPEAK	OUT PAC		
ADDRESS (number and s	reet) 2800 Shirlington R	Rd 	
Check if differenthan previously reported. (ACC)	Arlington		VA 22206 — —
2. FEC IDENTIFICAT	ON NUMBER ▼	CITY A	STATE ▲ ZIP CODE ▲
C C00530766		3. IS THIS REPORT (N	AMENDED (A)
4. TYPE OF REPO (Choose One) (a) Quarterly Report	Report Due On:	x Mar 20 (M3) Ju	ay 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) In 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Il 20 (M7) Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly R July 15 Quarterly R October 15 Quarterly R January 31	eport (Q2) (C) 12-Day PRE-Ele Report		General (12G) Runoff (12R) 2C) Special (12S) in the
Year-End R July 31 Mid Report (Noi Year Only) Termination (TER)	-Year In-election (MY) (d) 30-Day POST-E	for the:	D D / Y Y Y Y Y in the
5. Covering Period	02 01 Y	Election on through	State of
I certify that I have exan	Gross, Jennifer, ,		elief it is true, correct and complete.
Signature of Treasurer	Gross, Jennifer, , ,	[Electronically I	Filed] Date 03 18 2022
NOTE: Submission of false	e, erroneous, or incomplete i	information may subject the perso	on signing this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name WOMEN SPEAK OUT PAC 02 01 2022 02 28 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 546135.12 January 1, 2022 (b) Cash on Hand at 1570120.44 Beginning of Reporting Period..... 704429.89 1730245.89 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2276381.01 2274550.33 6(a) and 6(c) for Column B)..... 6703.69 8534.37 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 2267846.64 2267846.64 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 171995.38 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN SPEAK OUT PAC

I. Receipts	COLUMN A	COLUMNIA				
	Total This Period	COLUMN B Calendar Year-to-Date				
ontributions (other than loans) From:						
) Individuals/Persons Other						
(i) Itemized (use Schedule A)	484983.89	1510233.89				
(ii) Unitemized(iii) TOTAL (add	557.00	1123.00				
Lines 11(a)(i) and (ii)▶	485540.89	1511356.89				
,	0.00	0.00				
(such as PACs)	218889.00	218889.00				
,						
	704429.89	1730245.89				
	7 7	75 75 75				
arty Committees	0.00	0.00				
I Loans Received	0.00	0.00				
pan Repayments Received	0.00	0.00				
ffsets To Operating Expenditures	7 7	4 4				
· · · · · · · · · · · · · · · · · · ·	0.00	0.00				
1 - 1	0.00	0.00				
	0.00	0.00				
ther Federal Receipts						
· · · · · · · · · · · · · · · · · · ·	0.00	0.00				
	0.00	0.00				
(4 4	4 4				
) Levin Funds (from Schedule H5)	0.00	0.00				
) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
	(ii) Unitemized	(ii) Unitemized (use Schedule A)				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Disbursements COLUMN A Total This Period		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	13.55.1.100	Calendar Year-to-Date	
(i) Federal Share	0.00	0.00	
(ii) New Federal Chare	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
Expenditures	6703.69	8534.37	
(c) Total Operating Expenditures	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	
(add 21(a)(i), (a)(ii), and (b))▶	6703.69	8534.37	
Transfers to Affiliated/Other Party Committees	0.00	0.00	
Contributions to Federal Candidates/Committees	4 4		
and Other Political Committees	0.00	0.00	
Independent Expenditures (use Schedule E)	0.00	0.00	
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	7 7 7	0.00	
(use Schedule F)	0.00	0.00	
Loop Denouments Made	0.00		
Loan Repayments Made	0.00	0.00	
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	7 7 7 7	
Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	4 4	
(such as PACs)	0.00	0.00	
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))	0.00	0.00	
Other Disbursements (Including			
Non-Federal Donations)	0.00	0.00	
Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity	"		
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid	7 7 7		
Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00		
2.1100 00(a)(1), 00(a)(1) and 00(b))	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6703.69	8534.37	
Total Federal Disbursements	7 7	4 4	
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	6703.69	8534.37	
•	7,0.00	0034.37	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	704429.89	1730245.89
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	704429.89	1730245.89
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	6703.69	8534.37
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	6703.69	8534.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF	17	
(check only one)										
[X	11a		11b		11c		12		
		13		14		15		16	;	17

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Dobrzenski, Frank, , ,	Date of Receipt	
Mailing Address 5304 Sapphire Springs Dri	ive	02 01 2022
City	State Zip Code	Transaction ID : SA11AI.42768
Knightdale	NC 27545-7585	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Expedient Resource Services	Principal	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name of Individual (Last, First, Middle James, Virginia, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address P.O. Box 60		02 18 2022
City	State Zip Code	Transaction ID : SA11AI.42794
Lambertville	NJ 08530-0060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	162886.40
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Private Investor	Memo Item In-kind - Meta Platforms Inc Stock Received
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle James, Virginia, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address P.O. Box 60		02 18 2022
City	State Zip Code	Transaction ID : SA11AI.42796
Lambertville	NJ 08530-0060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	334552.95
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Private Investor	Memo Item In-kind - Netflix Com Inc. Stock Received
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)		
)	150.00
IDIAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

7 OF 17

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name James, Virginia, , , Date of Receipt Mailing Address P.O. Box 60 2022 City Zip Code State Transaction ID: SA11AI.42798 NJ Lambertville 08530-0060 Amount of Each Receipt this Period FEC ID number of contributing C 325113.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed Private Investor Netflix Com Inc. Stock Sold Receipt For: Aggregate Year-to-Date ▼ Primary General 325113.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** James, Virginia, , , Date of Receipt Mailing Address P.O. Box 60 2022 City State Zip Code Transaction ID: SA11AI.42799 NJ Lambertville 08530-0060 Amount of Each Receipt this Period FEC ID number of contributing 159470.39 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed Private Investor Meta Platforms Inc Stock Sold Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 484583.89 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Minks, Rachel, , , Date of Receipt Mailing Address 17024 Barium Street Northwest 14 2022 City State Zip Code Transaction ID: SA11AI.42780 MN Andover 55304-1623 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Capstone Homes Director of Community & Culture Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 484833.89 SUBTOTAL of Receipts This Page (optional).....

484983.89

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

В.

C

TOTAL This Period (last page this line number only).....

Image# 202203189494022339			
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 17 (check only one) 11a 11b
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
WOMEN SPEAK OUT PAC			
Full Name of Individual (Last, First, Middle Ir RESTORATION PAC	Date of Receipt		
Mailing Address 1901 BUTTERFIELD ROAD STE. 120 City	02 11 2022 Transaction ID : SA11C.42786		
DOWNERS GROVE	State IL	Zip Code 60515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C cod	0571588	218889.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 218889.00]
Full Name of Individual (Last, First, Middle Ir	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	1

Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle Ir Mailing Address City	nitial) or Full Organization Name State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General	C Occupation (for Individual) Aggregate Year-to-Date ▼	Amount of Each Receipt this Period Memo Item
Other (specify)		218889.00

218889.00

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s)			FOR LINE NUMBER: PAGE (check only one)							E 9	OF	17
TEMIZED DISBONSEMENTS		category of the Summary Page	`	×	21b	22		23		26	27		
					28a	28		28c		29	30b		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan													
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC													
Full Name (Last, First, Middle Initial) A. Denton US LLP Mailing Address 1900 K Street NW						Date	М		emen		2022	T Y	
		T							21		LULL		
City Washington	State DC	Zip Code 20006				FEC	lden	tificatio	n Nu	mber			
Purpose of Disbursement Legal Fee Candidate Name			_	-							3.42800		
			Cate Ty	gor pe	y/	Amo	unt o	f Each	Disb	ursem	ent this	-	d
Office Sought: House Disburser Senate President	nent For: Primary Other (spec	General							_	7	4900	.00	
State: District:	` '	,, ,				Ш	viem	o Item					
Full Name (Last, First, Middle Initial) 3. James, Virginia, , , Mailing Address P.O. Box 60						Date	М		emen		y y 2022	TY	
City Lambertville Purpose of Disbursement	State NJ	Zip Code 08530-0060				FEC	Iden	tificatio	n Nu	mber	_		
In-kind - Meta Platforms Inc Stock Received Candidate Name Category/ Type											3.42795 ent this	Perio	d
Office Sought: House Disburser Senate President	nent For: Primary Other (spec	General				162886.40							
State: District:						X	viem	o Item					
Full Name (Last, First, Middle Initial) James, Virginia, , ,						Date)isburs			YY	Y	
Mailing Address P.O. Box 60						0	2		18	L	2022		
City Lambertville	State NJ	Zip Code 08530-0060				FEC	Iden	tificatio	n Nu	mber			
Purpose of Disbursement In-kind - Netflix Com Inc. Stock Received				_	\neg	C	Trans	saction	ılD ·	SR211	3.42797		
Candidate Name		,	Cate Ty	gor pe	y/						ent this	Perio	d
Office Sought: House Disburser	nent For: Primary Other (spec	General wify) ▼				X	Memo	o Item		4	334552	.95	
						Г	-	-	-	_	4900	0.00	7
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)					_	F	=	7	=	7		1 1	╡

S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 17						
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	· · ·	(check only one)					
		Summary Page	28		23 28c	26	27 30b		
Any information copied from such Reports and State	nents mav	not be sold or use							
or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC									
Full Name (Last, First, Middle Initial)									
A. Merrill Lynch	M = M	of Disburse	D / Y	Y					
Mailing Address 200 Park Ave 13th Floor				02		2	2022		
City New York	State NY	Zip Code 10166		FEC Id	dentification	n Number			
Purpose of Disbursement Broker Fee For Stock Sold				C	ansaction	ID : SB21B	R 42804		
Candidate Name			Category/ Type	- 1		_	ent this Period		
Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General			1-7-1	17-1	831.01		
State: District:	outer (spe	·~··y/ ▼		Me	emo Item				
Full Name (Last, First, Middle Initial) B. Merrill Lynch				Date o	of Disburse		V V V		
Mailing Address 200 Park Ave 13th Floor				02		2 / Y	2022		
New York	State NY	Zip Code 10166			dentification	n Number			
Purpose of Disbursement Broker Fee For Stock Sold	C	ansaction	ID : SB21B	3.42805					
Candidate Name			Category/ Type	Amour	nt of Each	Disburseme	ent this Period		
Senate	ment For: Primary	General	71	٦Ľ.	4	4	767.11		
State: President District:	Other (spe	ecify)		Me	emo Item				
Full Name (Last, First, Middle Initial) C.					of Disburse				
Mailing Address				MM	/ D	D / Y	YYY		
City	State	Zip Code		FEC Id	dentification	n Number			
Purpose of Disbursement				C					
Candidate Name			Category/ Type	Amour	nt of Each	Disburseme	ent this Period		
Senate	ment For: Primary	General] L.	-				
State: District:	Other (spe	ecify) 🔻		Me	emo Item				
SUBTOTAL of Disbursements This Page (optional)				<u> </u>	1.45	1_20-1	1598.12		
TOTAL This Period (last page this line number only							6498.12		

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF 17

FOR LINE 13 OF FORM 3X

		Potanou cummary rago TOTT LINE 15 OF TOTHWI 5X
NAME OF COMMITTEE (IN FUII) WOMEN SPEAK OUT PAC		Transaction ID : SC/10.9700
LOAN SOURCE Full Name (Last, Figure Susan B Anthony List, Inc.	rst, Middle Initial)	N
Mailing Address 2800 Shirlington Rd Ste 1200		Other (specify) ▼
City	State	ZIP Code
Arlington	VA	22206
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
77452.55		0.00 77452.55
TERMS Date Incurred	Da	ate Due Interest Rate Secured:
M 11 / 30 / Y 2017 Y	M = M / D = D	11/30/2021 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if		
1. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City	tate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initia		Name of Employer
Mailing Address		Occupation
City	tate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initia	1)	Name of Employer
Mailing Address		Occupation
City	tate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initia	1)	Name of Employer
Mailing Address		Occupation
City	tate ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (opt	tional)	77452.55
TOTALS This Period (last page in this lin	ne only)	
Carry outstanding halance only to LINE	3 Schedule D for this	line If no Schedule D. carry forward to appropriate line of Summary

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 17

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2800 Shirlington Rd Other (specify) ▼ Ste 1200 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

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OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.39259 Outstanding Balance Beginning This Period 26889.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 4900.00 21989.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code Partlow 22534 Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4157 10500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 10500.00 34489.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 14 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Susan B Anthony List, Inc.			Nature of Debt (Purpose): Loan for FEC Reporting Services	
Mailing Address 2800 Shirlington Rd Ste 1200				
City Arlington	State VA	Zip Code 22206		
Outstanding Balance Beginning This Period			Transaction ID: SD10.4110	
5000.00				
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
0.00		0.00	5000.00	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
Susan B Anthony List, Inc.			Mailings Expense	
Mailing Address 2800 Shirlington Rd				
Ste 1200 City	State	Zip Code		
Arlington	VA	22206		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4318	
5204.43				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5204.43	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Susan B Anthony List, Inc.			Nature of Debt (Purpose): Original transactions put on SBA CC	
Mailing Address 2800 Shirlington Rd Ste 1200				
City Arlington	State VA	Zip Code 22206		
Outstanding Balance Beginning This Period Transaction ID : SD10.6625				
8610.00				
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
0.00		0.00	8610.00	
1) SUBTOTALS This Period This Page (optional)			18814.43	
2) TOTALS This Period (last page this line number only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶				

Excluding Loans

(Use separate schedule(s) for each

PAGE FOR LINE NUMBER: (check only one)

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numbered line) **X** 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6756 Outstanding Balance Beginning This Period 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1894.83 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.15960 200.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 200.00 6804.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Travel Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.15958 Outstanding Balance Beginning This Period 27.90 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 27.90 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary / Contractor Pay Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.39334 4324.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4324.16 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.41208 4950.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4950.00 9302.06 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17 OF
FOR LINE NUMBER:
(check only one)

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X	10

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer Production- Tradewinds See Schedule Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 State Zip Code Arlington VA 22206 Transaction ID: SD10.41901 Outstanding Balance Beginning This Period 15000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Tax1099.Com Filing Fees Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.42803 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 14.20 14.20 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 15014.20 1) SUBTOTALS This Period This Page (optional)..... 84424.25 2) TOTALS This Period (last page this line number only)..... 87571.13 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 171995.38 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶